	The second M	UNITED STATES	Single Add Page	REE, OF
		Address U	DE PACENTS AND TRADE	MARKS-
APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICATION	ATTORNEY DOCKET NO /TITLE	
09/044.626 33/1	The state of the displace of		13/2.002	
1 09/044 675		1		#2-
	0.38			
ALISA A HARBIN		1	NOT ASSIGNED	
/ CHIRON CORPORATIO	. 9	******		
/4560 HORTON STREE			1654	
		DATE MAI	LED: 04/28/98	
	NOTICE TO FILE MISSING Filing Da	ite Granted	ON	
			d below however are missing	Annlicant
An Application Number and Filing Dat is given TWO MONTHS FROM THE				
abandonment. Extensions of time m	ay be obtained by tiling a petiti	•ho CLIDCHARGE set forth i	n 37 CFR 1 16(e) of S65.00 fc	or a small
ntity in compliance with 37 CFR 1	.27, or 🗆 \$130.00 for a non-s	small entity, must also be tin	nely submitted in reply to this	NOTICE
it avoid abandonment.  If all required items on this form	are flied within the period S	et shove the total amount	owed by applicant as a	1. 1
if all required items on this form ( , □ small entity (statement filed) □	are filed within the periods  ☐ non-small entity is \$	386°0°		
1. The statutory basic filing fee missing.	is:		A STATE OF THE STA	
insufficient.	792) / to comple	ote the basic filing fee and/or	file a small entity statement c	laiming
Applicant must submit \$such status (37 CFR 1.27).		any multiple dependent clai		
2 Additional claim fees of \$	independent of		111 1000, are required.	
3 200 W for	10 dependent cla			
¢ for multi	iple dependent claim surchan	ge.		1
	nit the additional claim fees or	cancel additional claims for	which tees are due.	
<ul><li>3. The oath or declaration:</li><li>is missing or unexecuted</li></ul>	d.	and a second		1
☐ does not cover the newl	olication to which it applies.			
An oath or declaration in col	and state or foreign country	ncluding residence informati	on and identifying the applicat	iph by
the above Application Numb	ber and Filing Date is required	<b>6</b> 多性維持 多个	ر erson qualified under 37 CFR	
1 42 01 1 47		, " <u>"</u>		
A property signed oath or de Application Number and Fili	eclaration in compliance with ing Date, is required.	37 CFR 1.63, Identitying the	application by the above	
☐ 5. The signature of the following	g joint inventor(s) is missing f	rom the oath or declaration:	<b>.</b>	
As eath or declaration in co	mpliance with 37 CFR 1.63 li	sting the names of all invento	ors and signed by the omitted	
inventor(s), identifying this a	application by the above Appl	ication Number and Filing Da	ite, is requir <b>es</b> .	
☐ 0. A \$50.00 processing fee is re	equired since your check was d in error because your check	returned, without payment (3 was returned without payme	37.CFH 1.21(m)).	
A The application does not cor	mply with the Sequence Rules			
y 9ee attached Notice to Com  9. 0THER:	pply with Sequence Rules 37 (	JFN,1.021=1.025.	\$ 5555 \$ 6669	
Direct the reply and any gu stions	about this notice to "Attention	n: Box Missing Parts	\\$ 8988 \$ 3888 \$	
<b>曜日ましま</b> 。 - 円分割がりなりがちないりが	py of this notice My	A CONTRACT OF THE PARTY OF THE	the reply	
Chistomer Service Center				
Initial Patent Examination Division	(703) 308 1202			